

Acceptance Of The “Hamburg Home Visit For Older Citizens” In 4,716 Older People In 15 Months

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BACKGROUND

Preventive home visits for seniors are heterogeneous considering target groups, content, professional qualification and aims. Effectiveness has not been shown [1]. Nonspecific positive impulses are described in the development of communal structures and in the way participants feel valued. The City of Hamburg, Department of Health and Consumer Protection (BGV) promoted the pilot “The Hamburg home visit for older citizens” in two districts to provide information, to identify need of help and to initiate contact for support if wanted. The visit is voluntary, free-of-charge and offered to all persons on their 80th birthday and performed by visitors (background healthcare/social work) but do not include a comprehensive geriatric assessment (CGA). Aim is to promote active and independent living. Within a personal consultation, information is provided on the manifold health promoting and caring services in Hamburg [2].

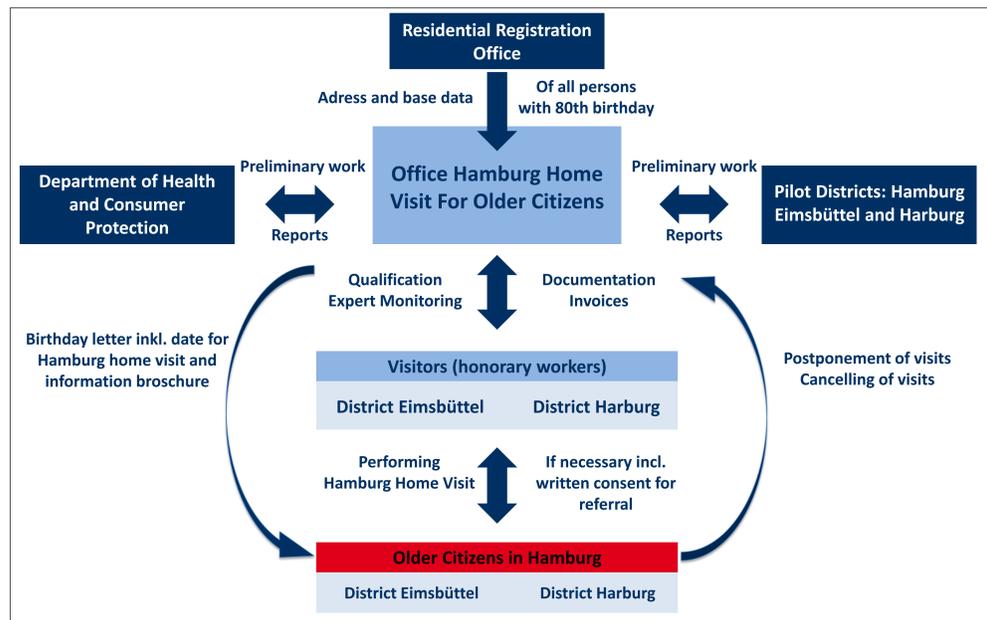
METHODS

Two different Hamburg districts were defined as pilot region: Eimsbüttel is a high density urban district and Harburg is a rather rural district, incl. less health-care infra-structure. The pilot phase covered 15 months from September 2019 to December 2020. The structural and administrative prerequisites were defined with officials of the city of Hamburg and the two city districts (Fig 1). Preliminary works included: data safety concept, provision of addresses, birthday letter, information to be provided (e.g. mobility/falls, nutrition, loneliness), recruitment, qualification and training of the visitors, guideline how to perform and communicate during the visit, documentation, quarterly reports. All persons who celebrated their 80th birthday within the pilot phase were offered a Hamburg home visit. In addition, even younger or older persons living in the two pilot-districts could also called for a home visit [3].

RESULTS

59 visitors were recruited (Tab. 1). From 09/2018-12/2019 4,716 (100%) persons were contacted, of whom 1,636 (35%) were visited. Acceptance rate over the pilot phase did not fluctuated and was comparable in both pilot districts (Fig 2). Relevant topics were general health (51%), mobility (43%), housing conditions (42%) and social contacts (41%) (Fig 3). Need of support was documented in 399/ 1,636 visits, and contacts for support were initiated as required by 55 persons [3].

Fig 1: Structure of the Hamburg Home Visit



Tab 1: Visitors characteristics

N female visitors	48/59 (81%)
N male visitors	11/59 (19%)
Mean age visitors	57 years (range: 27 – 79)
Professional background visitors	<ul style="list-style-type: none"> Social pedagogy, social work, pedagogy, gerontology (n=11) Nursing care, medical-technical staff, rescue assistance (n=11) Voluntary background (e.g. physical activity, senior citizens' meeting places, residential/care facilities, dementia care, palliative care) (n=11) Commercial activity in a welfare association (n=10) Medicine (n=4) Other: Legal care, senior support, alter. medicine (n=12)

Fig 2: Acceptance of the Hamburg Home visit over 15 months

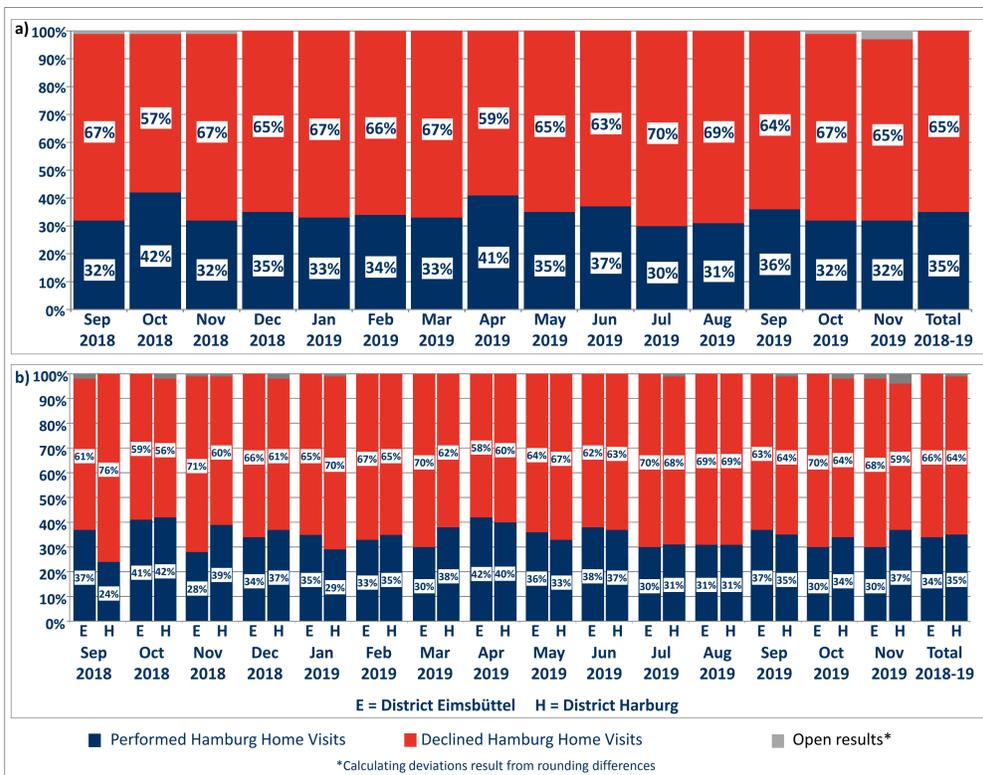
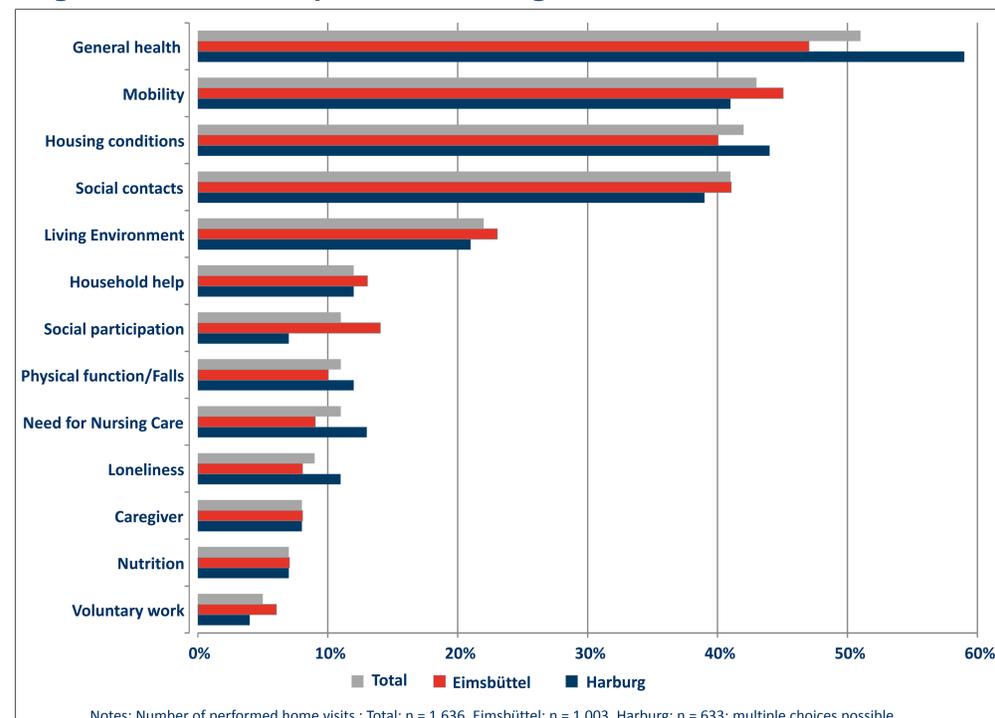


Fig 3: Relevant topics in Hamburg Home Visits



DISCUSSION

The acceptance-rate was 10% higher as had been expected. As CGA is not included, it must be checked in the further project development, whether it is necessary to refer to appropriate medical clarification in case of noticeable findings during the visits, e.g. geriatric outpatient clinics. Due to acceptance-rate of 35% the “Hamburg home visit” is now offered to all 15,000 Hamburg citizens/year with 80th birthday in all Hamburg districts [3].

References

- [1] Meinck et al. Gesundheitswesen 2004; 66:732-738 [2] Legal document City of Hamburg, statute 21/10874, 07.11.2017 [3] Neumann L et al. Z Gerontol Geriat 2021 · 54:471–478. <https://doi.org/10.1007/s00391-021-01878-8>